

State of New Jersey

OFFICE OF THE ATTORNEY GENERAL
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BUREAU OF SECURITIES
153 HALSEY STREET, 6TH FLOOR, NEWARK NJ

JAMES E. MCGREEVEY

Governor

PETER C. HARVEY
Attorney General
RENI ERDOS
Director

AGENT OF THE ISSUER EXAMINATION WAIVER REQUEST

Mailing Address:

The New Jersey Bureau of Securities requires a prospective Agent of the Issuer to pass the Series 7 (General Securities Representative) examination. This form should be used to request a waiver of this examination requirement and filed with the New Jersey Bureau of Securities at the address above. For additional information regarding issuer agent registrations, examinations, and waivers, please call (973) 504-3661.

P.O. Box 47029 Newark, NJ 07101 (973) 504-3600

| Name of Issuer (company): | | |
|--|--------------------------|-----------|
| Street Address: | | |
| City: | State: | ZIP Code: |
| Name of Issuer Agent (individual): | | |
| Office Telephone Number: | | |
| Type of Securities (Common Stock, Warrant | ts, Bonds, etc.) | |
| The undersigned hereby certify as follows: | | |
| 1. The issuer agent and the issuer's executive and sales of the issuer's securities by Reg | | 1 |
| 2. The issuer agent has the following securit | ties-related experience. | |
| a. Nature of duties: | | |
| b. Name of employer(s): | | |
| Signature of Officer of the Issuer: | Signature of | •• |
| Title: | | |
| Date: | Date: | |

Form NJBOS-15, 7/2003